Clinical Utilization Review Board (CURB) Meeting Minutes January 21, 2015

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PRESENT:

Board: Delores Burroughs-Biron, MD, Ann Goering, MD, Paul Penar, MD, Norman Ward, MD

DVHA Staff: Daljit Clark, Aaron French, Jennifer Herwood, Nancy Hogue, Mark Larson, Susan Mason, Thomas Simpatico, MD (moderator), Scott Strenio, MD,

Guests: Jay Persico

Absent: Michel Benoit, MD, Patricia Berry, David Butsch, MD, John Matthew, MD, William Minsinger, MD, Richard Wasserman, MD

HANDOUTS

Agenda

■ Draft minutes from 11/19/2014

■ The Vermont Statues Title 33 Chapter 19 33 VSA 2031

CONVENE: Dr. Thomas Simpatico convened the meeting at 6:35 pm.

1.0 Introductions

2.0 New Business

Budget Deficit

Mark Larson, DVHA Commissioner presented to the group that the State has a \$100 Million state revenue short fall in the budget. The budget proposal is trying to preserve VT Medicaid benefits and support health security while making sure we can keep the government going. We do not want to eliminate optional services or restrict eligibility and no provider wants to take a rate cut. How do we manage care better? How do we make sure we are connecting people to the right care that is cost effective and that we are managing the benefits that we have? Commissioner Larson is asking CURB and Drug Utilization Review Board (DURB) to help the state manage care within the financial target. He is engaging the CURB and DURB to find \$7Million to cut in SFY 2016 budget. CURB has statutory authority. CURB can make recommendations to the DVHA Commissioner that can be approved and implemented without further legislative action. Commissioner Larson hopes CURB can partner with providers and beneficiaries that focus on guiding to the right care rather than restructuring coverage. The decisions must be sound clinically and cost effective making, it not just a one year budgetary issue, but the way we move forward. Medicaid may be able to provide better service, not less. We need to help preserve important functions of State government. Commissioner Larson explained that we are half way through SFY 2015, so the sooner we move forward, the easier it will be to achieve the target.

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DVHA will identify potential strategies to meet Commissioner Larson's proposed targets to present to the Board at the next meeting.

How do we evaluate the potential of the proposals and how will we be able to show that we are successful in creating real savings? How can we distinguish it from trends and projections? In some areas there may need to be new investment in order to result in greater savings. The return on the investment would have to occur within the fiscal year. The savings could cross into other departments.

The SFY 2015 budget is on the DVHA website.

Action: DVHA will gather data and analyze trends for the board to review at the next meeting.

3.0 Review and Approval of Minutes

While reviewing the minutes there was discussion and clarification on some areas of the minutes. The minutes were then approved with a few changes.

4.0 Updates:

New Pharmacy Benefit Manager (PBM)

The new PBM Gould Health Systems was implemented on 1/1/2015. There were some start-up issues and the call volume was very high. Most of the issues have been resolved and DVHA is working to resolve the remaining issues. The call volume is still very high. Gould will offer a provider portal, they will handle the rebates, they will offer Prior Authorizations (PAs) to be done electronically and there is an enhanced query and reporting system. In addition, they have a local call center. Gould has been very responsive.

New Gold Card Members

DVHA reviews data annually to determine if there are new providers who qualify for a gold card for radiology services. The gold card criteria is: if a provider has 100 or more requests in 18 months and 3% or less denial rate, they qualify for gold card status. There were ten gold card providers and on 1/1/15 two more were added.

The Green Mountain Care Board (GMCB) was charged with working with private insurers for ideas for removing PA for imaging and drugs. There will be a pilot that will begin soon across all insurances in VT. The MRI lumbar spine was selected for two hospitals in VT. The two hospitals have radiologists who review every case. These two hospitals will not need to request PAs for MRIs of the lumbar spine.

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The pilot will be used to report on whether it would be beneficial to remove the PA requirement.

CURB Member Terms

Five CURB members will be coming up for reappointment. DVHA will be sending out letters to assess interest in continuing to serve on this board.

Low Dose CT Scan

CURB's recommendation to cover low dose CT Scans was approved by Commissioner Larson. We are currently working on the implementation. We will ask providers not to use code 72150, but to use the special S code. This will allows us to analyze the data. We will notify providers how to do this and we will continue to monitor this.

Adjournment – CURB meeting adjourned at 8:15 PM

Next Meeting

February 18, 2015

Time: 6:30 PM - 8:30 PM

Location: Department of Vermont Health Access, Williston, VT